Exhibit FF - Medicaid Mental Health Claims to Caseload Adjustment

	Fiscal Year	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B) and Disabled Individuals to 59 (AND/AB)	Categorically Eligible Low Income Adults (AFDC-A), Expansion Adults, and Baby Care Program- Adults ⁽¹⁾	Eligible Children (AFDC-C/BC)	Foster Care
FY 2004-05	Average Monthly Claims	36,200	57,371	73,804	244,786	16,119
	Average Caseload	35,780	54,011	63,124	222,472	15,795
	Claims as a Percentage of Caseload	101.17%	106.22%	116.92%	110.03%	102.05%
	Average Monthly Claims	36,924	58,313	72,736	235,280	16,823
FY 2005-06	Average Caseload	36,207	53,897	64,004	214,158	16,460
	Claims as a Percentage of Caseload	101.98%	108.19%	113.64%	109.86%	102.20%
FY 2006-07	Average Monthly Claims	36,556	59,610	71,948	228,286	17,242
	Average Caseload	35,888	54,858	61,031	205,390	16,724
	Claims as a Percentage of Caseload	101.86%	108.66%	117.89%	111.15%	103.10%
	Average Monthly Claims	36,844	60,461	69,277	225,078	17,793
FY 2007-08	Average Caseload	36,284	56,079	59,761	204,022	17,141
	Claims as a Percentage of Caseload	101.54%	107.81%	115.92%	110.32%	103.80%
FY 2008-09	Estimated Average Monthly Claims (2)	38,258	63,688	79,830	256,259	18,709
	Average Caseload	37,619	57,802	68,850	235,129	18,033
	Claims as a Percentage of Caseload	101.70%	110.18%	115.95%	108.99%	103.75%
Weighted Average Claims as a Percentage of Caseload (3)		101.65%	108.21%	116.06%	110.07%	102.98%
	Claims-to-Caseload Adjustment Factor	1.65%	8.21%	16.06%	10.07%	2.98%

¹ Breast and Cervical Cancer Program participants share a capitation rate with the Adult population, and comprise less than 1% of that total population. As such, a separate analysis was not performed.

² The claims for the most recent year are estimated to account for claims payment runout; previous years will have almost all claims paid while the current year has a disproportionate share of claims still in process and therefore not yet paid.

³ The most current year accounts for 50% of the weight, and the average of the previous four years account for the other 50% of the weight.

Exhibit FF - Medicaid Mental Health Claims-Based Adjustment Multiplier

	Fiscal Year	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B) and Disabled Individuals to 59 (AND/AB)	Categorically Eligible Low Income Adults (AFDC-A), Expansion Adults, and Baby Care Program- Adults (1)	Eligible Children (AFDC-C/BC)	Foster Care
FY 2006-07	Weighted Claims-Based Rate	\$13.38	\$105.60	\$14.95	\$12.80	\$280.10
	Weighted Capitation Rate	\$13.46	\$105.99	\$14.96	\$12.85	\$282.88
	Claims as a Percentage of Capitation	99.47%	99.63%	99.97%	99.55%	99.02%
	Weighted Claims-Based Rate	\$13.06	\$113.60	\$17.48	\$13.87	\$260.01
FY 2007-08	Weighted Capitation Rate	\$13.16	\$113.97	\$17.51	\$13.94	\$262.45
	Claims as a Percentage of Capitation	99.28%	99.67%	99.85%	99.49%	99.07%
FY 2008-09	Weighted Claims-Based Rate	\$13.49	\$122.70	\$18.40	\$14.47	\$253.57
	Weighted Capitation Rate (2)	\$13.57	\$123.13	\$18.47	\$14.57	\$255.42
	Claims as a Percentage of Capitation	99.43%	99.65%	99.62%	99.37%	99.28%
Average Claims as a Percentage of Capitation		99.39%	99.65%	99.81%	99.47%	99.12%
Claims-Based Adjustment Multiplier		-0.61%	-0.35%	-0.19%	-0.53%	-0.88%

¹ Breast and Cervical Cancer Program participants share a capitation rate with the Adult population, and comprise less than 1% of that total population. As such, a separate analysis was not performed.

² For Q3 and Q4 of FY 2008-09, the Department paid at 3% above the midpoint of the acutarial rate range. The number provided, here, reflects the actual expenditure to the Department and therefore does not match the number in Exhibit GG, which demonstrates the trend on the acutarila midpoints.